**Department of Health Services State of Wisconsin**

Division of Quality Assurance Wis. Admin Code ch. DHS 75.53

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# Residential Treatment Facility – Transitional Residential Treatment Service

# DHS 75.53

# Applicant Compliance Statement

Instructions: Prior to a surveyor coming to the facility/clinic for the onsite review, the applicant must ensure each item identified below is in compliance with Wis. Admin. Code ch. DHS 75.53 requirements.

Disclaimer: The statements in this document paraphrases the cited administrative rules. Refer to the language of the Wisconsin Administrative Code for the exact wording of the cited rules. This list should not be considered all-inclusive. The applicant is responsible for knowing and meeting all requirements.

By checking the boxes, submitting the signed and completed form the applicant is attesting that the facility is in substantial compliance and ready for an onsite review of regulatory compliance. Failure to demonstrate substantial compliance within 60 days of the completed application shall result in a denial of certification.

**The application is not considered complete until this signed compliance document is received.**

If you have questions regarding the completion of this form, email [dhsdqamentalhealthandsubstanceusecertification@wisconsin.gov](mailto:dhsdqamentalhealthandsubstanceusecertification@wisconsin.gov).

### Environment and observation

Resident rights, grievance procedure, and house rules are posted in a prominent public place available to residents, employees, and guests. [Wis. Admin. Code § DHS 75.34 - Wis. Admin. Code § DHS 83.13(3)(b)]

The exit diagram is posted on each floor of the CBRF used by residents in a place where it can be seen by the residents. [Wis. Admin. Code § DHS 75.34 - Wis. Admin. Code § DHS 83.13(3)(e)]

Emergency phone numbers are posted near phones used by residential treatment facility employees. [Wis. Admin. Code § DHS 75.34 – Wis. Admin. Code DHS 83.13(3)(f)]

Medicine cabinets are locked and the key available only to personnel identified by the residential treatment facility. [Wis. Admin. Code § DHS 75.39 – Wis. Admin. Code DHS 83.37(3)(c)]

Medications stored in a common refrigerator are properly labeled and stored in a locked box. [Wis. Admin. Code § DHS 75.39 – Wis. Admin. Code DHS 83.37(3)(d)]

The residential treatment facility provides hand-washing facilities in the kitchen for use by food handlers. Use of a common towel is prohibited. [Wis. Admin. § Code DHS 75.41 - Wis. Admin. § Code DHS 83.41(3)(a)2.]

Each refrigeration unit is maintained at or below 40° F. Food is covered and stored in a sanitary manner. [Wis. Admin. § Code DHS 75.41 - Wis. Admin. § Code DHS 83.41(3)(b)1.]

Each freezing unit is maintained at 0° F or below. [Wis. Admin. § Code DHS 75.41 - Wis. Admin. § Code DHS 83.41(3)(b)2.]

The residential treatment facility provides a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas contain furnishings appropriate to the intended use of the room. [Wis. Admin. § Code DHS 75.42 - Wis. Admin. § Code DHS 83.43(1)]

There is a laundry area to sort, process, and store clean and soiled laundry in a manner that prevents the spread of infection. [Wis. Admin. § Code DHS 75.42 - Wis. Admin. § Code DHS 83.44(1)(a)]

Clothes dryer vents tubing is constructed of rigid material with a fire rating that exceeds the temperature rating of the dryer. [Wis. Admin. § Code DHS 75.42 - Wis. Admin. § Code DHS 83.44(1)(c)]

There are no transoms, transfer grills, or louvers in bedroom walls or doors opening directly to a corridor. [Wis. Admin. § Code DHS 75.42 - Wis. Admin. § Code DHS 83.46(2)(b)]

A residential service that provides physical examinations or medical services shall have a patient examination or medical room. The patient examination or medical room shall contain all of the following: [Wis. Admin. § Code DHS 75.42(2)]

* A wall that physically separates the patient examination or medical room from other bedrooms, living areas, staff areas, or facility common areas.
* A curtain for privacy.
* A functioning sink that is equipped with appropriate equipment and supplies for infection prevention.
* A medical examination table.

The CBRF has a written plan for responding to emergencies and disasters that is readily available to all employees. The plan shall specify the responsibilities of employees. The plan includes all of the following: [Wis. Admin. § Code DHS 75.43 - Wis. Admin. Code § DHS 83.47(2)]

* Procedures for orderly evacuation or other department−approved response during an emergency or disaster; plan shall include procedures for any resident who refuses to follow evacuation or emergency procedures
* The CBRF’s response to serious illness or accidents
* Procedures to follow when a resident is missing
* The CBRF’s preparation for and response to severe weather including tornado and flooding
* A route to dry land when the CBRF is located in a flood plain
* Location of an emergency shelter for the residents
* A means of transporting residents to the emergency shelter
* How meals and medications will be provided to residents at the emergency shelter

Bedrooms open directly into a corridor, common living space, or the patients’ private living area. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(1)(c)]

Within each bedroom, each patient is provided a closet or wardrobe with clothes-hanging rods, shelves, and drawer space adequate to reasonably meet the needs of the patient. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(2)]

Each patient’s bedroom has a ceiling height of at least seven feet. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(1)(e)]

Patient bedrooms are located near toilet and bathing facilities and provide internal access to congregate dining and living areas. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(2)]

Each patient bedroom accommodates no more than two patients per room. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(3)]

In a class AA and class CA residential treatment facility, single occupancy bedrooms have a minimum of 80 square feet per patient and 60 square feet per patient in multiple occupancy bedrooms. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(4)(a)]

Basement bedrooms have at least two means of exiting that provide unobstructed egress to the outside or grade level. Windows in the basement are not considered exits. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(5)]

Each patient bed is at least 18 inches from a heat source or a distance that is recommended by the heat source manufacturer. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(6)]

There is a deflector on the register when the bed is located less than 18 inches from a forced air register. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(6)]

Beds do not block a forced air register. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.54(6)]

All sink areas have dispensers for single use paper towels, electric hand dryers, or cloth towel dispensing units that are enclosed for protection against being soiled. This requirement does not apply to sink areas located in toilet rooms access directly from a patient bedroom. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.55(3)]

Bath and toilet rooms have door locks to ensure privacy, except where the toilet, bath, or shower room is accessed only from a resident room that is occupied by one person. All door locks are operable from both sides. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.55(4)]

The temperature of all water heaters connected to sinks, showers, and tubs used by patients is set to a least 140° F. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.55(6)(b)]

No exit passageway is through areas such as a patient room, bath or toilet room, closet or furnace rooms. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.59(1)(e)]

There is a clear and unobstructed pathway to a safe distance away from the building. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.59.(1)(g)]

An exit path from the residential treatment facility through the garage to the outside is clear, safe, and unobstructed. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.59(1)(h)]

All doors shall have latching hardware to permit opening from the inside with a one-hand, one-motion operation without the use of a key or special tool. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.59(2)(a)]

A solid wood door or an equivalent fire resistive door, equipped with a positive latch and an automatic closing device, is provided at any interior stair between the basement and the first floor. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. § Code DHS 83.59(2)(b)]

Enclosed furnace and laundry areas with self−closing doors in a split level home may substitute for the self−closing door between the first and second levels. Enclosed furnace and laundry areas shall have self-closing, solid core wood doors or an equivalent fire resistive door when located on a common level with resident bedrooms. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.59(2)(b)]

All interior doors equipped with locks shall be designed to unlock from either side in case of emergency. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.59(2)(c)]

Furniture and other obstacles are not placed in front of the patio door. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.59(3)(c)]

Any shaft, such as a dumbwaiter or laundry chute leading to the basement, shall be provided with a door on each level above the lowest floor. The door shall have a positive latch and an automatic closing device and shall normally be kept closed. A spring of sufficient strength to close the door and activate the door latch is acceptable for meeting the automatic closing device portion of this requirement. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.59(5)(f)]

All required open-able windows shall have insect-proof screens. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.60(2)]

Every habitable room shall have shades, drapes, or other covering material or device that affords privacy and light control. [Wis. Admin. § Code DHS 75.45 - Wis. Admin. Code § DHS 83.60(3)]

### Personnel files

#### Staff training and orientation

Minimum training requirements for clinical staff [Wis. Admin. § Code DHS 75.19(4)(c)]

* Assessment and management of suicidal individuals.
* Safety planning for behavioral health emergencies.
* Assessment and treatment planning for co-occurring disorders.

Confidentiality: A service shall have staff training to ensure compliance with applicable confidentiality provisions of [42 CFR part 2](https://docs.legis.wisconsin.gov/document/cfr/42%20CFR%202), [45 CFR parts 164](https://docs.legis.wisconsin.gov/document/cfr/45%20CFR%20164) and [170](https://docs.legis.wisconsin.gov/document/cfr/45%20CFR%20170), ss. [51.30](https://docs.legis.wisconsin.gov/document/statutes/51.30), [146.816](https://docs.legis.wisconsin.gov/document/statutes/146.816) and [146.82](https://docs.legis.wisconsin.gov/document/statutes/146.82), Stats., and ch. [DHS 92](https://docs.legis.wisconsin.gov/document/administrativecode/ch.%20DHS%2092). Each staff member shall sign a statement acknowledging responsibility to maintain confidentiality of personal information about persons served. [Wis. Admin. § Code DHS 75.21]

Service for minors [Wis. Admin. § Code DHS 75.22(4)-(5)]

* (4) Staff delivering services to minors shall have training, experience, or education specific to the treatment of substance use and mental health for minors and shall practice within their scope. A record of relevant training, experience, or education shall be documented in the personnel record.
* (5) A service that delivers treatment services to minors shall provide training to clinical staff in the areas of adolescent development, family systems, child abuse and neglect, and involuntary treatment laws for minors, unless the service is able to provide documentation of the staff member’s previous training, professional education, or supervised experience addressing these areas. A record of required training shall be documented in the personnel record.

The service shall train all staff in recognition of overdose symptoms and administration of Naloxone. [Wis. Admin. § Code DHS 75.24(5)(d)]

#### If no CBRF license:

Before an employee performs any job duties [Wis. Admin. § Code DHS 75.33(1) - Wis. Admin. Code § DHS 83.19]

* Job responsibilities.
* Prevention and reporting of resident abuse, neglect and misappropriation of resident property.
* Information regarding assessed needs and individual services for each resident for whom the employee is responsible.
* Emergency and disaster plan and evacuation procedures under s. [DHS 83.47 (2)](https://docs.legis.wisconsin.gov/document/administrativecode/DHS%2083.47(2)).
* CBRF policies and procedures.
* Recognizing and responding to resident changes of condition.

Department-approved trainings [Wis. Admin. § Code DHS 75.33(1) - Wis. Admin. Code § DHS 83.20(2)(a)-(d)]

* Standard precautions
* Fire safety
* First aid and choking
* Medication administration and management

All employee training. [Wis. Admin. § Code DHS 75.33(1) - Wis. Admin. Code § DHS 83.21(1)-(3)]

* Resident rights
* Client group
* Recognizing, preventing, managing, and responding to challenging behaviors.

Until an employee has completed all required training, the employee shall be directly supervised by the administrator or by qualified resident care staff. [Wis. Admin. § Code DHS 75.33(1) - Wis. Admin. Code § DHS 83.23]

#### Personnel requirements

Current Caregiver Background Checks for staff including: Background Information Disclosure (BID) form, Department of Justice Report (DOJ) report, Governmental Findings Report (GFR), and out-of-state check (if applicable). [Wis. Admin. § Code DHS 75.19(1) – s. 50.065 – ch. DHS 12]

A separate record for each employee [Wis. Admin. § Code DHS 75.19(2)]

* A written job description including duties, responsibilities and qualifications required for the employee.
* Beginning date of employment.
* Qualifications based on education or experience.
* A completed caregiver background check following procedures under s. [50.065](https://docs.legis.wisconsin.gov/document/statutes/50.065), Stats., and ch. [DHS 12](https://docs.legis.wisconsin.gov/document/administrativecode/ch.%20DHS%2012).
* A copy of a signed statement regarding confidentiality of client information.
* Documentation of any required training.
* A copy of any required licenses or certifications.

### Minimum staffing requirements

A service shall have a service director. [Wis. Admin. § Code DHS 75.18(1)]

A service shall have a clinical supervisor. [Wis. Admin. § Code DHS 75.18(2)]

A service shall have a substance abuse counselor. [Wis. Admin. § Code DHS 75.18(3)]

Requires a prescriber knowledgeable in addiction treatment available to provide medical and clinical consultation, either as an employee of the service or through a written agreement. [Wis. Admin. § Code DHS 75.48(2)(d)]

A service may have nurses. The service shall ensure appropriate training and oversight of nursing staff. [Wis. Admin. § Code DHS 75.18(5)]

Mental health professional required either as an employee of the service or through written agreement, to provide coordinated and concurrent services for the treatment of individuals with co-occurring mental health disorders. [Wis. Admin. § Code DHS 75.48(2)(f)]

### Patient record templates

The following list is a selection of patient record requirements that will be reviewed during the onsite initial survey. [Wis. Admin. § Code DHS 75.20(1)(b)]

* Consent for treatment forms signed by the patient or the patient’s legal guardian, if applicable, that are maintained in accordance with s. DHS 94.03.
* An acknowledgment by the patient or the patient’s legal guardian, if applicable, that the service policies and procedures were explained to the patient or the patient’s legal guardian.
* A copy of the signed and dated patient notification that was reviewed with and provided to the patient which identifies patient rights, and explains provisions for confidentiality and the patient’s recourse in the event that the patient’s rights have been abused.
* Results of all screening, examinations, tests, and other assessment information.
* A completed copy of the standardized placement criteria and level of care assessment at admission, and subsequent reviews of level of care placement criteria.
* Treatment plan
* Records for any medications prescribed or administered by the service, including any medication consent records required by s. DHS 94.09.
* Consents authorizing disclosure of specific information about the patient.
* Discharge documentation.

### Treatment service schedules

Required treatment services: At least 6 hours of treatment services per patient per week. [Wis. Admin. § Code DHS 75.48(2)(a)]

### Policies

Policy development is required for the following topics. All topics may not be reviewed in advance but shall be available upon request.

Compliance with client rights, DHS 94 and s.51.61 [Wis. Admin. § Code DHS 75.17(1)(c)2]

No person discriminated against 45 CFR part 92 [Wis. Admin. § Code DHS 75.17(1)(c)3]

Clinical Supervision in accordance w/ch. SPS 162, Chs MPSW 4, 12, 16, ch Psy 2 [Wis. Admin. § Code DHS 75.19(3)]

Staff development [Wis. Admin. § Code DHS 75.19(4)]

Universal Precautions adheres to OSHA stands in 29 CFR 1910.1030 [Wis. Admin. § Code DHS 75.19(5)]

Case Records screening/consultation, referral only clients [Wis. Admin. § Code DHS 75.20(2) (a)-(c)]

Confidentiality P/P CFR Part 2, 45 CFR parts 164 and 170, s 51.30, ch DHS 92 [Wis. Admin. § Code DHS 75.21]

Services for Minors consider safety, vulnerability r/t adult pop in facility, supervision, specific need of youth [Wis. Admin. § Code DHS 75.22(7)]

Emergency After Hours [Wis. Admin. § Code DHS 75.24(3)]

Safety planning [Wis. Admin. § Code DHS 75.24(4)(b)]

Naloxone administration [Wis. Admin. § Code DHS 75.24(5)(c)]

Service delivery Intoxicated/withdrawal/at risk withdrawal clients [Wis. Admin. § Code DHS 75.24(6)(a)-(d)]

Tobacco Use approach to assessment and treatment, smoke-free environment [Wis. Admin. § Code DHS 75.24(7)]

Cultural/linguistic needs of community serviced [Wis. Admin. § Code DHS 75.24(8)]

Intake and admission [Wis. Admin. § Code DHS 75.24(9)(a)1-4]

Referral stating how to refer clients to other community service providers & coordinating care [Wis. Admin. § Code DHS 75.24(12)(a)]

Clinical consultation policy [Wis. Admin. § Code DHS 75.24(14)(a)-(g)]

Clinical Staffing policy [Wis. Admin. § Code DHS 75.24(15)(a)-(c)]

Group counseling [Wis. Admin. § Code DHS 75.24(17)(a)-(c)]

Family services policy addressing confidentiality/conflicts of interest/ethics[Wis. Admin. § Code DHS 75.24(18)(c)]

Medical services [Wis. Admin. § Code DHS 75.24(19)(d)1-4]

Storage/dispensing/disposal of meds [Wis. Admin. § Code DHS 75.24(19)(h)]

Drug testing/breathe analysis/toxicology services [Wis. Admin. § Code DHS 75.24(20)]

Discharge, service director review of admin D/C or client dissatisfaction D[Wis. Admin. § Code HS 75.24(22)(b)]

Discharge, service director review of death from overdose [Wis. Admin. § Code DHS 75.24(22)(c)]

Outcome monitoring/QI Plan [Wis. Admin. § Code DHS 75.25]

Physical separation: residential physically separated from other entities/programs/services. [Wis. Admin. § Code DHS 75.32(4)]

Residential services for minors, P/P address safety/supervision, family services/supports, behavioral expectation/interventions [Wis. Admin. § Code DHS 75.36(1)]

Education needs of each residing minor [Wis. Admin. § Code DHS 75.36(2)]

Emergency medical care: staff trained life sustaining tech (CPR/defibrillator/ER 1st aid) [Wis. Admin. § Code DHS 75.37(1)]

Written plan for emergency medical care [Wis. Admin. § Code DHS 75.37(2)]

Written plan for emergency transportation [Wis. Admin. § Code DHS 75.37(3)]

Physical Environment [Wis. Admin. § Code DHS 75.42(3)]

Safety [Wis. Admin. § Code DHS 75.43(2)(a)-(e)]

Guests and Visitors [Wis. Admin. § Code DHS 75.44(1)-(3)]

### Applicant attestation

*I attest that all statements made on this form are true and correct to the best of my knowledge.*

**Signature** — Applicant:

Name – Applicant (printed):       Date signed: